Eating Disorders: Silent and Paralyzing for those who Struggle Within By LT Tamara L. Koch, RD, MSC, USN

Eating disorders exist even though many try to hide or deny they struggle with this deadly disease on a daily basis. The different types of eating disorders include anorexia nervosa, bulimia nervosa and binge-eating. An estimated 3.7% of females suffer from anorexia, 4.2% suffer from bulimia and another 5% of Americans suffer from binge-eating disorders in their lifetime (National Institutes of Health). What do these percentages equate to? The National Association of Anorexia and Related Disorders estimate that eight million Americans currently suffer from an eating disorder. In a lifetime, an estimated four million American females suffer from anorexia nervosa, and an estimated five and a half million suffer from bulimia. Community surveys show an estimated 5.3 to 13.3 million Americans experience binge eating during a six month period. Eating disorders are more common among females; however, men suffer from this disease too. Of the three types, bulimia is more prevalent among active duty military because bulimia is easier to hide.

Symptoms of Anorexia Nervosa include less than a normal weight for height with an intense fear of gaining weight or becoming fat. Body image distortion becomes a reality where someone who is 5'8" and weighs 80 pounds looks into a mirror and sees him or herself weighing 400 pounds. In reality that person's ideal body weight is between 140 – 154 pounds. According to the American Dietetic Association common symptoms include absent menstrual periods, food becomes an obsession where unusual eating habits develop. This includes avoiding food or eating small bite-sized portions. Some may weigh their foods and repeatedly weigh themselves. The mortality rate is 12 times higher than those that do not suffer from anorexia. Common causes of death are associated with cardiac arrest, electrolyte imbalances, starvation and suicide.

Symptoms of Bulimia Nervosa include recurrent episodes of binge eating up to 4,000 calories in a short time. The episode is followed by purging either through self-induced vomiting, abuse of laxatives, diuretics, enemas, or excessive exercise. Purging occurs due to feelings of guilt, to prevent weight gain and to obtain an emotional release. People with bulimia weigh within a normal range for their height, have a fear of gaining weight, desire to lose weight and struggle and are displeased with their body image. Common symptoms include behaviors of secrecy, feeling disgusted when they binge and relieved once they purge. A binge-eating episode usually occurs without feeling hungry, is brought on by stress, consists of eating at a fast rate without control, eating until feeling uncomfortably full to the point of pain and most eat alone where no one can witness their actions.

Bing-eating has the same symptoms of Bulimia without purging. Most people who suffer from binge-eating disorders are heavy and weigh more than their ideal body weight.

Most individuals with an eating disorder are perfectionists, high achievers both professionally and academically, are emotionally insecure, have low self-esteem and lack confidence. They are concerned with being accepted, how others view them, feel alone

and believe they are not good enough. They are usually very independent even though they do not trust their own abilities. Eating disorders develop as an attempt to escape the individual's reality and feel better. Most people who suffer from eating disorders are extremely knowledgeable about appropriate portion sizes and nutrient contents of foods, and understand the roles nutrients provide the body. Having nutrition knowledge alone is not enough when dealing with an eating disorder. There are psychological and social reasons that cause this disease. These issues need to be treated if there is any hope for recovery.

Getting treatment as soon as possible is important. A multi-disciplinary approach is most effective consisting of a medical evaluation, a registered dietitian, individual, group and/or family therapy and/or hospitalization. Some require intense treatment while others less intense depending on the magnitude of the disease. Regardless of the degree, everyone should obtain nutrition and mental health guidance in order to deal with underlying issues that created the eating disorder. U.S. Naval Hospital, Okinawa has started weekly eating disorder support group sessions every Monday from 1100-1200. Call LT Jim Condon, 643-7722 or LT Tamara Koch, 643-7502 to find out details on registering for individual and/or group nutrition and psychotherapy sessions.